



Docket No. 41426-D/JPW/SHS

In re application of: Ron S. Israeli et al.

Serial No.: 08/470,735

Group Art Unit: 1645

Filed: June 6, 1995

Examiner: S. Gucker

For: PROSTATE-SPECIFIC MEMBRANE ANTIGEN

HONORABLE ASSISTANT COMMISSIONER FOR PATENTS  
Washington, D.C. 20231

February 29, 2000

S I R:

Transmitted herewith is an amendment to the above-identified application.

- Small entity status of this application under 37 C.F.R. § 1.9 and § 1.27 has been established by a verified statement previously submitted.
- a verified statement to establish small entity status under 37 C.F.R. § 1.9 and § 1.27 is enclosed.
- No additional fee is required.

The filing fee is calculated as follows:

|  | NUMBER<br>AFTER<br>AMEND-<br>MENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |       | NUMBER OF<br>EXTRA<br>CLAIMS<br>PRESENTED | RATE                           |                 | FEE             |                 |
|--|-----------------------------------|---|-------|---|--------------------------------|-----------------|-----------------|-----------------|
|  |                                   |   |       |   | SMALL<br>ENTITY                | OTHER<br>ENTITY | SMALL<br>ENTITY | OTHER<br>ENTITY |
| Total Claims   | 48                                | -   | * 105 | = *** 0                                   | x                              | 9               | 18              | = 0 0           |
| Independent Claims   | 8                                 | -   | ** 7  | = *** 1                                   | x                              | 39              | 78              | = 39 0          |
| Multiple Dependent Claims(s) Presented <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                   |   |       |   | 130                            | 260             | 130             | 0               |
|  |                                   |   |       |   | TOTAL ADDITIONAL \$ 169.00 FEE |                 |                 |                 |

\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\*If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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Amendment Transmittal Letter  
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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims as originally filed.

Please charge Deposit Account No. \_\_\_\_\_  
in the amount of \$ \_\_\_\_\_.

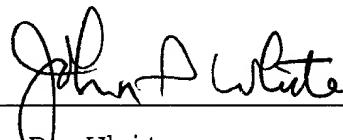
A check in the amount of \$ 604.00 is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Three copies of this sheet are enclosed.

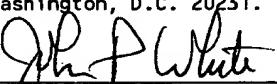
Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,



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|  |                 |
|--|-----------------|
| I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231. |                 |
| <br>John P. White<br>Reg. No. 28,678  | 2/29/00<br>Date |